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NO. 3252 P. 1

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Jamie D. Wardell

(Depositor's name)

Jamie D. Wardell

(Signature)

(Date)

APPLICATION NO.	FILED DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/674,611	09/29/2003	Robert A. Rousseau	ETH5097	4200

TITLE OF INVENTION: SURGICAL WOUND CLOSURE/TRANSFER MARKING DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	05/14/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS			
POUS, NATALIE R		3731	606-213000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.36).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ETHICON, INC.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

SOMERVILLE, NEW JERSEY

Recordal Date: 9/29/2003

Reel/Frame: 014565/0349

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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- Issue Fee
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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Blossom E. Loo

Date May 11, 2007

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